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| **C:\Users\Enam\Desktop\EMS logo 3D.jpg** (License Num: MLA-127 & MLC 2006 Certified) | | Revision No: | |  |
| Page: | | Page 1 of 4 |
| Form No: | |  |
| **Address** | H:23 (3RD Floor),Flat:3/A. Mansur Ali Sarani (Old 38,Magbazar Road)Dhaka: | | | |
| **Email** | **resume@esm.com** | **Website** | **www.eurekashipmanagement.com** | |



Photo

|  |
| --- |
| Application for Employment |

|  |  |  |  |
| --- | --- | --- | --- |
| 1 |  | Position REGISTRATION NO | |
|  | | | |
|  |  | Position applied for: | Oiler/ Engine Cadet |
|  |  | Are you willing to accept any other positions? |  |
|  |  | If YES, which positions would you consider? |  |
|  |  | Readiness From |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 2 |  | | Personal details | | | | | | | | | | | | | | |
|  |  | |  | | | | | | | | | | | | | | |
| Given Name: | |  | | | | Sur Name: | | | |  | | Marital Status: |  | |
| Date of Birth: | |  | | | Date of Place: | | | |  | | | Nationality: |  | |
| Height(cm): | |  | Weight(kg): | |  | | | Safety Shoe: | | |  | Boiler Suit: |  | |
| Mailing Address: | | | | | | | | | | | | | Post Code: |  |
| : +88 | | | | : +88 | | | Email: | | | | | | 146px-Skype_logo: | |

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| 3 |  | Education Background | | | | |
|  |  |  | |  |  |  |
|  |  | Name of Institute | | From Year | To Year | Highest Qualification Attained |
|  |  | School |  |  |  |  |
|  |  | College |  |  |  |  |
|  |  | Pre Sea-Training |  |  |  |  |
|  |  | Other Qualifications |  |  |  |  |

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| 4 |  | Identity documents | | | | | |
|  | | | | | | | |
|  |  | DOCUMENT | COUNTRY | NUMBER | ISSUE DATE | PLACE OF ISSUE | EXPIRY DATE |
|  |  | Passport: |  |  |  |  |  |
|  |  | Seaman’s book: |  |  |  |  |  |
|  |  | Visa – US ‘C1/D’ | YES / NO |  |  |  |  |
|  |  | Holding Australian MCV | YES / NO |  |  |  |  |

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| 5 |  | Family details | | | | | | | | | | | | | | | | |
|  |  | |  | |  | | | | | | |  | | |  | | | |
|  |  | Next Of Kin/Nominee | | | | First Name: | |  | | | Sur Name: | |  | | | Relationship: |  | |
|  |  | Address: | |  | | | | | | | | | | | | | | |
|  |  | 🖁Hand Phone No. | | | | |  | | | | 🕿Telephone No. | | |  | | | | |
|  |  | Relation | | Name | | | | | P.O.B | D.O.B. | PPT NO. | | D.O.I. | | | P.O.I. | | D.O.E. |
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| 6 |  | National Certificate of Competency (Highest certificate of *competency held)* | | | | | | | |
|  | | |  | | |  | |
|  |  | Class/Grade | | Issuing Country | Certificate No. | | Date Issued | Place Issued | Valid Until |
|  |  | CLASS- | |  |  | |  |  |  |
|  |  |  | |  |  | |  |  |  |

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| 6a |  | National Dangerous Cargo Endorsements | | | | | |
|  |  |  | | | | | |
|  |  |  | Endorsement Type | Certificate No. | Date Issued | Place Issued | Valid Until |
|  |  | Petroleum |  |  |  |  |  |
|  |  | Liquefied Gas |  |  |  |  |  |
|  |  | Chemicals |  |  |  |  |  |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 7 |  | Flag State Equivalent Certificates of Competency issued by other countries *(Issued by countries other than in Section 6)* | | | | | | | | |
|  | | | |  | | |  | | |
|  |  | Class | Issuing Country | | Certificate No. | Date Issued | | Place Issued | Valid Until | | |
|  |  |  | Liberia | |  |  | |  |  | | |
|  |  |  | Panama | |  |  | |  |  | | |
|  |  |  | Bahamas | |  |  | |  |  | | |

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| 7 |  | Flag State Equivalent Dangerous Cargo Endorsements *(Issued by countries other than in Section 6a)* | | | | | |
|  |  |  | | | | | |
|  |  | Country | Endorse Type/ Level | Certificate No. | Date Issued | Place Issued | Valid Until |
|  |  | Liberia |  |  |  |  |  |
|  |  | Marshall Islands | Management |  |  |  |  |
|  |  | Panama | Adv. Oil & Chemical |  |  |  |  |
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| 8 |  | Certificates (STCW and Value added) | | | | | |
|  |  |  |  |  |  |  |  |
|  |  | Course | Institution | Place | Cert. No. | Issue Date  (DD/MM/YY) | Expiry Date  (DD/MM/YY) |
|  |  | Personal Survival Techniques |  |  |  |  |  |
|  |  | Basic / Advance Fire Fighting |  |  |  |  |  |
|  |  | Fire Prevention and Fire Fighting |  |  |  |  |  |
|  |  | Elementary First AID |  |  |  |  |  |
|  |  | Basic Training for Oil and Chemical Tanker Cargo Operation |  |  |  |  |  |
|  |  | Medical First Aid |  |  |  |  |  |
|  |  | Capt.’s Medical Guide/ Medical Care |  |  |  |  |  |
|  |  | Proficiency in Survival Craft and rescue Boats other than First Rescue Boat-PSCRB |  |  |  |  |  |
|  |  | Personal Safety and Social responsibility |  |  |  |  |  |
|  |  | Ship Security Officer |  |  |  |  |  |
|  |  | Tanker Familiarization (Oil, Chem, Gas) |  |  |  |  |  |
|  |  | Adv. Oil Tanker Course |  |  |  |  |  |
|  |  | Adv. Chemical Tanker Course |  |  |  |  |  |
|  |  | Bridge & Eng. Room Resource Mgmt. |  |  |  |  |  |
|  |  | Shipboard Safety Officer |  |  |  |  |  |
|  |  | Marine Environment Protection |  |  |  |  |  |
|  |  | ISPS Code Familiarization |  |  |  |  |  |
|  |  | Automatic Radar Plotting Aid (ARPA) |  |  |  |  |  |
|  |  | Electronic Navigation System |  |  |  |  |  |
|  |  | Security Awareness Training (SAT) |  |  |  |  |  |
|  |  | Security Training for Seafarer with designated Security Duties |  |  |  |  |  |
|  |  | High Voltage Installation |  |  |  |  |  |
|  |  | Elect. Chart Display & Info System |  |  |  |  |  |
|  |  | *OTHER RELEVANT COURSES* |  |  |  |  |  |
|  |  | Rating as Able Seafarer Engine (III/5) |  |  |  |  |  |
|  |  | Rating as Able Seafarer Deck (II/5) |  |  |  |  |  |
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| 9  9 |  | Record of previous service |
|  |  | (Please give a full record starting with the last vessel on which you served) |

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| VESSEL NAME | COMPANY | VESSEL TYPE | FLAG | DWT  (MT) | GRT  (MT) | MAIN ENGINE | | BHP /  (KW) | RANK | SIGN ON  (DD/MM/YY) | SIGN OFF  (DD/MM/YY) | SEATIME  (MM-YY) | Reason For Termination |
| Maker | Type |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 10 |  | For Engineers (Please provide Makers, Model & Capacity details) | |
|  |  |  | |
|  |  | Boilers |  |
|  |
|  |  | Generators |  |
|  |
|  |  | Cranes / Grabs |  |
|  |
|  |  | Purifiers |  |
|  |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 11 |  | Sailing Experience: (Please advise PRESENT RANK EXPERIENCE on each type of vessel) | | | | | | | | | | | | |
|  |  |  | | | | | | | | | | | | |
|  |  | CONT/RFG  (MM-DD) | G. CARGO  (MM-DD) | BC/OBO/RR  (MM-DD) | | PCC/PCTC  (MM-DD) | OIL/VLCC  (MM-DD) | CHEMICAL  (MM-DD) | | PRODUCT  (MM-DD) | LPG/LNG  (MM-DD) | | OTHERS  (MM-DD) | TOTAL RANK  EXPERIENCE |
|  |  |
|  |  |  |  |  | |  |  |  | |  |  | |  |  |
|  |  |
|  |  | LAST SALARY DRAWN | | |  | | | | EXPECTED SALARY | | |  | | |

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| 12 |  | References *(Please give the name and address of your current or immediate past employer)* | | |
|  |  |  | | |
|  |  | Company Name |  |  |
|  |  | Address |  |  |
|  |  | Contact Person / Designation |  |  |
|  |  | Contact Number/ E-Mail |  |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 13 |  | Miscellaneous ( *Please give the details of your FC account )* | | | | | | |
|  |  |  |  | | |  | | |
|  |  | Bank Name |  | | Branch : | |  | |
|  |  | Account Name |  | | | | | |
|  |  | Bank Address |  | | | | | |
|  |  | Account No. |  | Swift / BIC Code | | | |  |

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| 14 |  | Medical history | | |
|  |  |  | | |
|  |  | Have you ever signed off a ship due to medical reasons? | Yes/No |  |
|  |  | Have you undergone any operation in the past? | Yes/No |  |
|  |  | Have you consulted a doctor during the last 12 months for an illness/accident? | Yes/No |  |
|  |  | Do you have any health or disability problems now? | Yes/No |  |

(If the answer is YES to any of the above, please give full details and attach a separate page if necessary)

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| 15 |  | Declaration |
|  |  |  |
|  |  | I hereby declare that the above particulars are true and authorize you to contact the referees listed above. |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Name/Signature | Date |